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August 2, 2002

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To: Consolidated Waiver Program (CWP) Home and Community Support  
Services (HCSS) Agency Providers

Subject: Long Term Care (LTC)  
CWP Information Letter No. 02 - 05  
Change of Service Code for Dental Services

Upon receipt of this letter Home and Community Support Services (HCSS) agencies providing dental service must bill under Service Group (SG) 17, Service Code (SC) 5A, Emergency Dental Services for Consolidated Waiver Program (CWP) participants. This change was made effective July 18, 2002 in the Claims Management System (CMS). SG 17, SC 5 for dental services is no longer valid. The HCSS agency must submit a claim for the amount of dental services using SG 17, SC 5A, Billing Code N0600. If your agency submits a claim for dental services using SC 5 on or after July 18, 2002 the claim will be rejected.

If your agency billed and was paid for a dental claim prior to July 18, 2002 using SG 17, SC 5, CMS has recouped the amount of the paid claim. CMS staff will re-bill for these claims at the same amount of the recoupment using SG 17, SC 5A during the week of July 29, 2002. HCSS providers do not need to re-bill claims for dental services unless dental services were billed using SC 5 instead of SC5A on or after July 18, 2002.

Form CWPISP-1, Individual Service Plan; CWPDSD, Documentation of Services Delivered; and CWP Provider Handbook (Draft) Appendix II, Billing Rates will be revised to indicate the change to SC 5A for dental services.

If you have questions or need additional information, please contact your contract manager Anna Leal at (512) 438-3444 or electronically at [anna.leal@dhs.state.tx.us](mailto:anna.leal@dhs.state.tx.us).

Sincerely,

*Signature on file*

Becky Beechinor  
Assistant Deputy Commissioner  
Long Term Care Services

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